

PART B - FEE(S) TRANSMITTAL

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7590 10/12/2004

BAKER & HOSTETLER LLP
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Washington Square
1050 Connecticut Avenue, N.W.
Washington, DC 20036



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(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/084,143	02/28/2002	David Engel	87335.3461	5066 12/14/2004 SFELEKE2 00000129 502036 10084143

TITLE OF INVENTION: RETAINING RING APPARATUS AND METHOD

01 FC:1504	300.00	DP
02 FC:1501	21.00	DA
03 FC:8001	9.00	DA

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1370	\$300	\$1670	01/12/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
THOMPSON, KENNETH L	3672	403-274000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	Baker & Hostetler LLP
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.		2. _____
<input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.		3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

SPX Corporation

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

13515 Ballantyne Corporate Place
Charlotte, NC 28277

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

- Issue Fee
- Publication Fee (No small entity discount permitted)
- Advance Order - # of Copies Three (3)

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A check in the amount of the fee(s) is enclosed. \$1,679.00

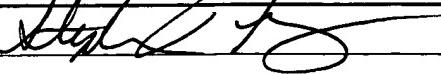
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The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-2036 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature 

Date 10/13/04

Typed or printed name Stephen S. Fabry

Registration No. 51,661

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